



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042

Canc: Feb 2015
IN REPLY REFER TO
BUMEDNOTE 1520
BUMED-M00C2
20 Feb 2014

BUMED NOTICE 1520

From: Chief, Bureau of Medicine and Surgery
To: Ships, Stations, and Battalions having Dental Personnel

Subj: ANNOUNCEMENT OF FISCAL YEAR 2015 DENTAL RESIDENCY TRAINING,
POSTDOCTORAL EDUCATION AND TRAINING, AND ADVANCED CLINICAL
PROGRAMS

Ref: (a) MANMED, Chapter 6, article 6-20
(b) OPNAVINST 6110.1J
(c) ASD(HA) Policy Memo 10-012 of 30 Sep 2010
(d) DoD Instruction 6000.13 of 30 Jun 1997
(e) BUMEDINST 1520.41
(f) OPNAVINST 7220.17
(g) Title 10 U.S.C.
(h) SECNAV M-5314.1 of December 2005

Encl: (1) Fiscal Year 2015 Advanced Dental Education Availability Announcement
(2) Sample Request Letter for Advanced Dental Education
(3) Duty Under Instruction Fiscal Year 2015 Program Director and Specialty Leader
Contact Information
(4) Summary of Active Duty Obligation for Graduate Dental Education
(5) Application Checklist

1. Purpose. To announce the availability of dental residency training, postdoctoral education and training, and advanced clinical programs (ACP) beginning in fiscal year (FY) 2015 and to provide information concerning application procedures. References (a) through (g) provide additional information.

2. Cancellation. BUMEDNOTE 1520 of 29 Jan 2013.

3. Background. Chief, Bureau of Medicine and Surgery will convene a selection board to recommend Dental Corps officers for assignment to full-time residency training programs, postdoctoral education and training programs, and ACPs in FY 2015. Full-time inservice (FTIS) residency training programs are conducted at the Naval Postgraduate Dental School, Bethesda, Maryland; various military hospitals; and other federal institutions. Training for exodontia ACP is conducted at the Captain James A. Lovell Federal Health Care Center, Great Lakes, Illinois. A limited number of full-time outservice (FTOS) residency and postdoctoral education and training programs are available in civilian universities and institutions.

4. Availability of Programs. Reference (a) describes Department of the Navy (DON) training programs for dental officers. The needs of the Navy determine the programs available for training and number of trainees projected for each program. Enclosure (1) lists the approved residency and postdoctoral educational programs beginning in FY 2015.

a. Residency Training Programs. Inservice residency training programs train dental officers for the needs of Navy and Marine Corps beneficiaries. Outservice residency training programs supplement inservice residencies and/or provide training in specialty areas not available in military training programs. All residency training programs must meet the American Dental Association Commission on Dental Accreditation (ADA/CODA) certification requirements when applicable. Board certification is essential to specialty practice in Navy Dentistry. Dental officers selected for any residency program funded by the Navy, whether it is an inservice or outservice program, are expected to pursue board certification.

b. Fellowships. Fellowships may, based on the needs of the Navy, be approved for specified specialties. All fellowship training programs must meet the ADA/CODA certification requirements when applicable.

c. Advanced Clinical Program (ACP) in Exodontia. The 1-year exodontia ACP provides general dentists with advanced clinical skills in exodontia. A utilization assignment following completion of an ACP is required prior to further applications for residency training.

5. Eligibility for Application for Postgraduate Dental Education. Consideration of an officer's military record, clinical care background, assignments (particularly operational or overseas assignments), total years of active duty service, and sustained superior military performance are an integral part of the duty under instruction (DUINS) board deliberations. Applicants for postgraduate dental training programs must be academically qualified and:

a. Cannot be in a "failed to select" promotion status for the grade of lieutenant commander (O-4) or Commander (O-5). If an officer is a Commander and has failed to select for Captain (O-6), the officer may apply for training.

b. If unable to complete 20 years of active commissioned service by age 62, must submit a written request for an age waiver with their application.

c. Must meet all physical readiness requirements as per reference (b).

d. Must not be subject to or pending administrative separation, punishment under the Uniformed Code of Military Justice or a civilian criminal conviction, or involved in any type of action and/or activity considered to be misconduct.

e. Must be universally deployable, and willing and able to meet the needs of the Navy, even in the event of temporary separation from spouse, family, and/or significant other(s). Upon completion of training, the Service member, if so assigned, must accept an operational billet, including ship or Marines, or an overseas billet, if ordered to do so. If a Service member's family does not meet overseas screening requirements, the Service member may be given unaccompanied orders to meet mission requirements.

f. Must have approval for selection by the Dental Corps Assignment Officer if there is requirement to break the minimum time on station or are in receipt of permanent change of station orders with a projected rotation date later than the program's convening date at the time of application.

6. Application

a. Applicants must submit the following:

(1) Letter of Request and Commanding Officer's/Dean's Letter of Endorsement. Write a letter of request using enclosure (2) as a guideline. Submit to your commanding officer (active duty applicants) or Dental School Dean (dental student applicants), asking that they provide a **separate** letter of endorsement for your application. The endorsement must be written on Command or Dean's letterhead.

(2) Statement of Motivation. Write a one-page statement explaining the reasons you are requesting training. Do not print the statement on Command or Dean's letterhead. Place a signature line on the bottom of your statement in the following format and sign:

Active Duty:

(Rank) (First Name) (Middle Initial) (Last Name), DC, USN

Health Professions Scholarship Program (HPSP) and 1925i:

ENS (First Name) (Middle Initial) (Last Name), DC, USNR

Health Scholarship Collegiate Program (HSCP):

(Rank) (First Name) (Middle Initial) (Last Name), USN

(3) Official Scholastic Transcripts. Request an official transcript for all college, dental school, and other significant education be sent directly to the Graduate Dental Education Office.

(4) Class Rank. If your dental school transcript does not provide a class rank and/or grade point average (GPA), you must request a letter from the Dean's office providing your class rank or equivalent. If your dental school does not rank students, the Dean's letter must state so. This office will not accept e-mails or letters directly from the applicant reporting class rank.

(5) National Board Dental Examination (NBDE) Part I and II scores. Request an official copy of your NBDE scores be sent directly to the Graduate Dental Education Office.

(6) Graduate Record Examination (GRE), General Test. The GRE is not required but highly recommended, particularly for applicants without class rank or GPA or with Pass/Fail NBDE scores. **Use code 0790 to send scores directly to "Navy Graduate Dental Programs."** The following are two Web sites, the Navy Medicine Professional Development Command (NMPDC) Graduate Dental Education Office recommends you visit to prepare for the GRE.

Defense Activity for Non-Traditional Education Support (DANTES) funds one administration each of the GRE General (CBT) and GRE Subject (paper-based) exams per lifetime for eligible Service members. GRE Subject exams taken at a National Test Center are not reimbursable.

GRE Test Prep site

<http://www.nelnetsolutions.com/dod/DODHubPage.aspx?sponsor=12894&HubPage=10061>

DANTES GRE Re-Imbursement

http://www.dantes.doded.mil/Sub%20Pages/Exams/Exams_GRE.html

(7) Advanced Dental Education Application Brief Sheet. Complete and submit NAVMED 1520/16, Advanced Dental Education Application Brief Sheet.

(8) Letters of Evaluation. Maximum of three may be submitted using NAVMED 1520/17, Evaluation of Advanced Dental Education. It is suggested that at least one evaluation be written by a dental officer in the specialty area requested for training. Evaluations are confidential and not to be released to the applicant. Evaluators must send completed evaluation forms directly to the NMPDC Graduate Dental Education Office. Letters of Evaluation are a sealed part of the board and not available for viewing by the candidate.

(9) Certified true copy (front and back) of fitness reports covering the last 5 years. If you do not have fitness reports covering 5 years, submit a copy of all fitness reports on file. Please do not submit more than 5 years of fitness reports. Any additional will be removed from your application. Please remove (black out) all social security numbers from the fitness reports prior to sending them to the NMPDC Graduate Dental Education Office.

(10) Interview. Applicants are required to complete an interview as part of the application. Enclosure (3) lists the program director (PD) or specialty leader (SL) for the specialty training opportunities announced in enclosure (1). Applicants can arrange for an interview by contacting the PD or SL directly. Interviews do not have to be in person but must be scheduled prior to the application deadline.

b. Electronic submission of application materials is permitted

(1) Of the items listed in paragraph 6a above, *Letter of Request and Commanding Officer's/Dean's Letter of Endorsement* (1), *Statement of Motivation* (2), *Advanced Dental Education Application Brief Sheet* (7), and *Certified true copy of the last 5 years of fitness reports* (9) may be scanned and a PDF copy submitted via e-mail by the applicant.

(2) *Letters of Evaluation* (8) may be scanned and a PDF copy submitted via e-mail by the evaluator only.

(3) *Official Scholastic Transcripts* (3), *Class Rank* letter (4), *NBDE Scores* (5), and *GRE Scores* (6) must be submitted by the educational institution or testing agency from which they are requested. Electronic copies of these items will be accepted if they are sent directly by the educational or testing institution.

(4) Results of the *Interview* (10) may be scanned and a PDF copy submitted by the PD or SL.

c. All electronic submissions must use the GraduatePrograms.DC@med.navy.mil e-mail address.

d. Applications can also be mailed to the address below. Please note that it may take up to 3 weeks for items to reach this office via United States Postal Service (USPS). This office recommends you utilize an express mail service of your choice with letter/package tracking and a receipt. Mailing address:

Associate Dean, Graduate Dental Education
Navy Medicine Professional Development Center
Code 1WPGDC, Bldg. 1, 16th Floor
8955 Wood Road
Bethesda, MD 20889-5628

e. Active Duty Obligation (ADO) incurred for participation in dental residency training programs is 1 year for each year of FTIS or FTOS training with a minimum 2-year obligation. ACP training and 1-year fellowships have a 2-year ADO. Endodontic and orthodontic residents incur a minimum of 3 years of ADO regardless of program length. Programs leading to a master's degree (which require additional training and/or funding) or a doctoral degree incur ADO of three times the length of education or training for the first year. If the master's or doctoral degree is incidental to the completion of an established residency or fellowship program, there is no incurred ADO. Additional ADOs for participation in excess of 1 year are a half year for each half year. Enclosure (4) outlines ADOs for graduate dental education.

f. Dental special pays for officers in residency programs comply with references (c) and (d). Reference (c) is available at: [http://www.health.mil/libraries/HA Policies and Guidelines/10-012.pdf](http://www.health.mil/libraries/HA_Policies_and_Guidelines/10-012.pdf)

7. Application Deadline. Applications for training beginning in FY 2015 must be received at GraduatePrograms.DC@med.navy.mil or via mail postmarked no later than Wednesday, 1 May 2014. Early submission is highly encouraged. It is the applicant's responsibility to verify receipt of all parts of the application by the Graduate Dental Education Office by the deadline. New applications postmarked later than 1 May 2014 will not be accepted without an endorsement from the SL. It is the applicant's responsibility to contact the SL directly and request a written endorsement. Enclosure (5) is a checklist to assist applicants with the application process.

8. Notification. The FY 2015 DUINS Selection Board will meet in June 2014. Board results are made available shortly afterwards. Upon receiving electronic notification of acceptance, selectees must respond as requested within 4 weeks to confirm their appointment, otherwise the selectee risks relinquishing his or her appointment to an alternate selectee.

9. FTOS Failure to Match. Applicants who are selected for FTOS programs by the DUINS board, but are unsuccessful in gaining admission to a civilian program are placed in a “pre-select” status for the next fiscal year DUINS board and are automatically enrolled in the corresponding FTIS or tri-service program for that fiscal year, if one exists. These selectees do not have to reapply for training. Applicants selected for FTOS programs in disciplines that do not have corresponding FTIS programs are not granted a “pre-select” status and must reapply for future training opportunities.

10. Conduct During Residency. Dental officers in training programs are expected to maintain the highest standards of naval service. Misconduct, failure to remain within physical fitness standards, and/or poor academic performance are grounds for disenrollment from a program. Protocols for addressing these issues are outlined in reference (e). Obligated service incurred for any completed training must be honored.

11. Failure to Select for Next Rank Prior To or During Residency. Dental officers who become “fail to select” for promotion will be allowed to matriculate into their selected training program, and if already matriculated, will be allowed to complete their residency provided they are meeting their program requirements. Officers in the rank of Lieutenant (O-3) or O-4 who are in a fail to select status for a second or greater time will be retained on active duty per guidance in Section 632(c)(1) of reference (g) until their obligated service for training is fulfilled.

12. For questions concerning the application process, please contact the Office of the Associate Dean for Graduate Dental Programs, Navy Medicine Professional Development Command at commercial (301) 295-0650 or (301) 319-4509; DSN 295-0650 or 285-4509 or by e-mail at GraduatePrograms.DC@med.navy.mil.

13. Records Management. Records created as a result of this notice, regardless of media and format, shall be managed per SECNAV M-5210.1 of January 2012.

14. Reports. The reporting requirements in paragraphs 5b, 6a(1), 6a(4), and 6a(7) through 6a(9) are exempt from reports control per SECNAV M-5314.1 of December 2005, Part IV, paragraph 7(p).

15. Forms. The following forms are available electronically via the Navy Medicine Web site at the ‘Forms’ tab from <http://www.med.navy.mil/directives/Pages/NAVMEDForms.aspx> :

- a. NAVMED 1520/16 (Rev. 1-2013), Dental Education Application Brief Sheet
- b. NAVMED 1520/17 (Rev. 1-2013), Evaluation for Advanced Dental Education.



M. L. NATHAN

Distribution is electronic only via the Navy Medicine Web Site at:
<http://navymedicine.med.navy.mil/directives/Pages/default.aspx>

**FISCAL YEAR 2015 ADVANCED DENTAL EDUCATION
AVAILABILITY ANNOUNCEMENT**

Full-Time Inservice (FTIS) Residencies and Postdoctoral Education Programs

Comprehensive Dentistry ²
Endodontics ²
Oral and Maxillofacial Pathology ³
Maxillofacial Prosthetics ¹
Oral and Maxillofacial Surgery ⁴
Orofacial Pain ⁵
Periodontics ³
Prosthodontics ³

**Full-Time Outservice (FTOS) Residencies and Postdoctoral Education Programs
(Civilian/Tri-service)/Uniformed Services University**

Dental Research ⁶
Operative and Preventive Dentistry ³
Oral and Maxillofacial Surgery ⁴
Oral and Maxillofacial Fellowship ¹
Oral and Maxillofacial Radiology ³
Orofacial Pain ⁵
Orthodontics ²
Pediatric Dentistry ²
Prosthodontics ³

Advanced Clinical Programs (ACP)

Exodontia ¹

- | |
|---|
| ¹ 1-year clinical program or fellowship
² 2-year residency
³ 3-year residency
⁴ 4-year residency
⁵ 2-year fellowship or 3-year residency
⁶ 2-year master's degree or 4-year PhD. |
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BUMEDNOTE 1520
20 Feb 2014

**SAMPLE REQUEST LETTER FOR ADVANCED DENTAL EDUCATION
(NO LETTERHEAD)**

Date

From: (Rank) (Name of Applicant), (DC if applicable), (USN or USNR), DOB: dd mmm yyyy
To: Commanding Officer, Navy Medicine Professional Development Center, Graduate
Dental Programs, CODE 1WPGDC, 8955 Wood Road, Bethesda, MD 20889-5628
Via: Commanding Officer, (Name of Command) or Dean, (Name of Dental School)

Subj: FISCAL YEAR 2015 NAVY DENTAL CORPS ADVANCED DENTAL
EDUCATION

Ref: (a) BUMEDNOTE 1520 of 20 Feb 2014
(b) DODINST 6000.13 of 30 Jun 1997

Encl: (1) Statement of Motivation
(2) Advanced Dental Education Application Brief Sheet, NAVMED 1520/16
(3) Fitness Reports (if applicable)

1. Per reference (a), I request to be considered for assignment to residency training in (discipline), commencing in fiscal year 2015. I request to be considered for *(insert following as appropriate based on specific program or programs you are applying: only full time in-service (FTIS) training at a Navy residency or advanced clinical program; only full time out-service (FTOS) training at a civilian institution, other federal service or tri-service dental facility; considered equally for FTIS and FTOS*

2. My graduation date from Dental School was/is _____ (dd/mm/yyyy).

3. My present duty assignment commenced on _____ (dd/mm/yyyy).

4. Official scholastic transcripts for all college, dental, and other significant education, class rank, National Board Dental Examination scores, Graduate Record Examination scores (if available), and a maximum of three letters of evaluation using NAVMED 1520/17 Evaluation for Advanced Dental Education have been requested.

5. My Statement of Motivation (enclosure 1), Application Brief Sheet (enclosure 2), and a certified true copy of my fitness reports for the last 5 years (if available) (enclosure 3) are provided.

6. I have arranged for an interview with the appropriate Program Director/Specialty Leader as directed. The results of my interview will be forwarded directly to the Graduate Dental Programs office by the interviewer.

Enclosure (2)

Subj: FISCAL YEAR 2015 NAVY DENTAL CORPS ADVANCED DENTAL EDUCATION

7. If this request for residency training is approved, and I am assigned to such training, I agree not to resign during the residency and to serve in the Navy for my service obligation plus any previously unfulfilled service obligation after completion of the residency course. I understand my service obligation for the requested primary residency to be ___ years (enter service obligation per enclosure (4) of reference (a)). This will be served in conjunction with any unfulfilled service obligation existing prior to the start of the residency program. I understand that this period of obligation service is in addition to that for which I may be previously and otherwise obligated and it may or may not be performed concurrently (reference (b)).

8. I understand the Privacy Act of 1974 (P.L. 93-579) became effected on 27 September 1975 and is applicable to personal data records maintained on U.S. citizens and foreign national admitted for permanent residence. My signature acknowledges that I am familiar with the statements contained herein and authorize use of information provided for the purposes listed.

PRIVACY ACT STATEMENT

The authority to request this information is contained in 5 U.S.C. 301 and Department Regulations. The principle purpose of the information is to enable you to make know your desire for the Naval School of Health Sciences to initiate and maintain a training file on your behalf. The information will be used to assist officials and employees of the Department of the Navy in determining your eligibility for and approving or disapproving the education authorization being requested. Completion of this form is mandatory; failure to provide required information may result in delay in response to or disapproval of your request.

Signature

Printed Name

**DUTY UNDER INSTRUCTION FISCAL YEAR 2015 PROGRAM DIRECTOR
AND SPECIALTY LEADER CONTACT INFORMATION**

Comprehensive Dentistry

CAPT Marc Arena, DC, USN
Specialty Leader
Naval Postgraduate Dental School
Bethesda, MD
(301) 295-5446; DSN 295-5446
Marc.E.Arena.mil@health.mil

Dental Research

CAPT Jonathan Stahl, DC, USN
Specialty Leader
Naval Medical Research Unit
San Antonio, TX
(210) 539-6979; DSN 389-7866
Jonathan.M.Stahl.mil@mail.mil

Endodontics

CAPT Terry Webb, DC, USN
Specialty Leader and Program Director
Naval Postgraduate Dental School
Bethesda, MD
(301) 295-1831; DSN 295-1831
Terry.D.Webb.mil@health.mil

Operative and Preventive Dentistry

CAPT Scott Kooistra, DC, USN
Specialty Leader
Naval Postgraduate Dental School
Bethesda, MD
(301) 319-4687; DSN 285-4687
Scott.Kooistra.mil@health.mil

Maxillofacial Prosthetics

CDR William Wilson, DC, USN
Specialty Leader and Program Director
Naval Postgraduate Dental School
Bethesda, MD
(301) 295-5828; DSN 295-5828
William.O.Wilson.mil@health.mil

Oral and Maxillofacial Radiology

CDR Ann Monasky, DC, USN
Specialty Leader
Naval Postgraduate Dental School
Bethesda, MD
(301) 295-4013; DSN 295-4013
Ann.B.Monasky.mil@health.mil

**Oral and Maxillofacial Surgery and
ACP Exodontia**

CAPT Jesse Lee, DC, USN
Specialty Leader
Naval Medical Center Portsmouth
Portsmouth, VA
(757) 953-2761; DSN 377-2761
Jesse.Lee@med.navy.mil

Orthodontics

CDR L. Chad Burton, DC, USN
Specialty Leader
Naval Health Clinic Annapolis
Annapolis, MD
(410) 293-3927; DSN 281-3927
Larry.Burton@med.navy.mil

Orofacial Pain

CDR Istvan Hargitai, DC, USN
Specialty Leader and Program Director
Naval Postgraduate Dental School
Bethesda, MD
(301) 295-3254; DSN 295-3254
Istvan.A.Hargitai.mil@health.mil

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Pediatric Dentistry

CAPT Roberto Cabassa, DC, USN
Specialty Leader
Naval Hospital
Rota, Spain
011-34-956-82-3032
DSN 314-727-3032
Roberto.Cabassa@med.navy.mil

Periodontics

CDR John Wilson, DC, USN
Program Director
Naval Postgraduate Dental School
Bethesda, MD
(301) 319-4674; DSN 285-4674
John.H.Wilson.mil@health.mil

Prosthodontics

LCDR Peter Barndt, DC, USN
Program Director
Naval Postgraduate Dental School
Bethesda, MD
(301) 295-5829; DSN 295-5829
Peter.R.Barndt.mil@health.mil

**SUMMARY OF ACTIVE DUTY OBLIGATION
FOR GRADUATE DENTAL EDUCATION**
(Based on Reference (f))

1. **In a Military Facility (Full-time in-service (FTIS)/Other Federal Institutions (OFI)).**

A member must incur an Active Duty obligation (ADO) of half year for each half year, or portion thereof, but the minimum ADO at the completion, termination, or withdrawal of the Graduate Dental Education (GDE) period will not be less than 2 years. The ADO for GDE may be served concurrently with obligations incurred for Department of Defense (DoD) sponsored pre-professional (undergraduate) or dental school education. No active duty obligation for GDE can be served concurrently with ADO for a second period of GDE, i.e., obligation for fellowship or 2nd Navy-sponsored residency cannot be served concurrently with an obligation incurred for initial residency training.

2. **In a Civilian Facility on Active Duty (Full Time out service (FTOS)).** A member subsidized by the DoD during training in a civilian facility must incur ADO of half year for each half year or portion thereof, but the minimum ADO at the completion, termination, or withdrawal of the GDE period will not be less than 2 years. ADOs for FTOS training are added to obligation existing at the time training begins.

3. **In a Civilian Facility in a Deferred Status (Navy Active Duty delay for Specialists (NADDS)).** A member deferred for specialty training incurs no additional obligation as long as a 2-year obligation exists at the time the training begins. Members with less than 2 years of active duty obligation will incur a 2-year minimum term of service.

4. **Fellowship Training in a Military or Civilian Facility.** The minimum ADO for training is 2 years. Payback is consecutive with prior GDE (residency) ADO.

APPLICATION CHECKLIST

Application Deadline is Wednesday, 1 May 2014

	Item	Who Submits?	Notes	✓ when requested or submitted
1	Letter of Request with Commanding Officer's Endorsement	Applicant submits		
2	Statement of Motivation	Applicant submits		
3	Official Scholastic Transcripts	School submits		
4	Class Rank	School submits		
5	National Board Dental Examination Scores	Testing Agency submits		
6	Graduate Record Examination Scores	Optional; Testing Agency submits		
7	Advanced Dental Education Application Brief Sheet, NAVMED 1520/16	Applicant submits		
8	Letters of Evaluation (Maximum of 3), NAVMED 1520/17	Evaluators submit		
9	Fitness Reports (Covering last 5 years; certified true copies)	Applicant submits		
10	Interview	Program Director or Specialty Leader submits		